



## **BCSLs “Under the Microscope” Enewsletter, June 2022**

### **BC Provincial Blood Coordinating Office**

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The BC Provincial Blood Coordinating Office (PBCO) is a program within Provincial Laboratory Medicine Services, Provincial Health Services Authority (PHSA). PBCO has responsibility to provide and coordinate provincial blood and blood product utilization programs and to manage specialized provincial resources. In collaboration with provincial stakeholders, PBCO facilitates the advancement of transfusion medicine practices through unique initiatives that support the effective and appropriate use of blood and blood products across the province. PBCO assists the BC Ministry of Health with leadership and with coordination of blood-related issues and activities. PBCO is designed to work within the framework of a nationally integrated blood system while still reflecting the unique qualities of the regional nature of British Columbia's health care system.

The PBCO was established in 1997 as an advisory body to the BC Ministry of Health following Canada's tainted blood scandal and the resulting Krever Inquiry. Developed in 1999 the Central Transfusion Registry (CTR) is a centralized registry containing all the disposition data for blood and blood products in BC. The CTR provides a wealth of utilization data to support various quality and utilization initiatives. It also enables the ability to perform look backs and trace backs for all transfusions in the province; which was a shortfall noted in the Krever Inquiry.

Accurate data is key to both contingency and inventory planning. Decision makers need to understand what inventory is available in the province, regardless of whether it is at Canadian Blood Services or hospitals. To this end, the PBCO collaborated with health authorities to implement the Transparent Blood Inventory System (TBI). TBI is a near real-time inventory application in which hospitals in BC and Yukon electronically submit their blood product inventory to the application on an hourly basis. The partnership between health authorities, Canadian Blood Services and the PBCO enables easy accessibility to near real-time transparent inventory information to be in the event of a contingency.



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PBCO operates an Immunoglobulin (Ig) Utilization Management Program to ensure that enough Ig is available for patients likely to benefit from the treatment. Ig is an expensive, limited resource product that is available in two forms subcutaneous and intravenous. Ig is prepared commercially using plasma derived from donors. The program incorporates the BC Ministry of Health Policy on Health Authority Immune Globulin Utilization Management Directives. All requests for Ig use are screened either in the hospital Transfusion Medicine Services or by specialist physician panels in order to make sure that Ig is used in accordance with the BC Ig Utilization Management Program Recommendations. The PBCO facilitates and supports specialist physician screening of all adult rheumatology IVIg requests and select neuromuscular neurology requests.

PBCO facilitates two redistribution programs. To help minimize Red Cell waste, PBCO coordinates a Provincial Red Cell Redistribution Program. Participating small and medium-sized hospitals send blood that is nearing its expiry date (10-14 days before expiry) to a designated large hospital where blood is more likely to be used. Factor products are expensive blood products with a shelf life of two to three years. In order to minimize product expiry and waste of unused hospital stock, PBCO coordinates a provincial Factor Redistribution Program. The safety and quality of redistributed red cell and factor products is ensured by the adherence of participating hospitals to the procedures described in the program procedures and manuals.

PBCO in collaboration with its provincial stakeholders develops transfusion educational resources and materials to support provincial programs. These resources target appropriate blood and blood product use and promote provincial safe transfusion practice in BC. In collaboration with physicians, technologists and nurses, PBCO has also developed a series of tools, templates and resources to support transfusion reaction recognition and reporting. This helps BC remain an active participant in the nationally coordinated Transfusion Transmitted Injuries Surveillance System (TTISS)

On the PBCO website, there are manuals and procedures to guide provincial stakeholders in many transfusion activities. In addition to resources aimed at supporting technologists there is also the TM Medical Policy Manual which presents optimal Transfusion Medicine practice guidelines for all levels of physicians responsible for



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Transfusion Medicine services in BC. The Clinical Transfusion Resource Manual was developed to support clinical practitioners in providing and promoting safe and standardized blood transfusion practices, education, and training.

PBCO supports three provincial working groups. The Technical Resource Group (TRG) for Transfusion Medicine (TRG) provides transfusion medicine technical advice to the PBCO, liaises with other hospital-based staff to communicate about PBCO initiatives and priorities, and helps implement PBCO projects and programs within health authorities. The Nursing Resource Group (NRG) provides support and tools such as the Transfusion Competency Tool, intended for use by Registered Nurses across the BC to enhance the safety and quality of the transfusion process. The Transfusion Medicine Advisory Group (TMAG) provides expert medical, clinical and technical advice and guidance on blood transfusion therapy and blood and blood products to all provincial stakeholders.

Along with the CTR and TBI, PBCO created other applications to support its mandate. The Inherited Coagulopathy and Hemoglobinopathy Information Portal (iCHIP) is a real time patient centric web application with integrated clinic and patient modules.

The mandate for PBCO is to promote and facilitate the delivery of safe appropriate, standardized and sustainable use of blood and blood products throughout BC. The above articulates how PBCO meets that mandate.